

Appendix 5

Permit to Construct Application



DEQ AIR QUALITY PROGRAM
 1410 N. Hilton, Boise, ID 83706
 For assistance, call the
Air Permit Hotline – 1-877-5PERMIT

PERMIT TO CONSTRUCT APPLICATION

Revision 2
 02/13/07

Please see instructions on page 2 before filling out the form.

COMPANY NAME, FACILITY NAME, AND FACILITY ID NUMBER			
1. Company Name	Idaho Milk Products		
2. Facility Name	Milk Processing Plant	3. Facility ID No.	
4. Brief Project Description - One sentence or less	Construction of new milk processing plant.		
PERMIT APPLICATION TYPE			
5. <input checked="" type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modify Existing Source: Permit No.: _____ Date Issued: _____ <input type="checkbox"/> Required by Enforcement Action: Case No.: _____			
6. <input checked="" type="checkbox"/> Minor PTC <input type="checkbox"/> Major PTC			
FORMS INCLUDED			
Included	N/A	Forms	DEQ Verify
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form GI – Facility Information	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form EU0 – Emissions Units General	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form EU1 - Industrial Engine Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form EU2 - Nonmetallic Mineral Processing Plants Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form EU3 - Spray Paint Booth Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form EU4 - Cooling Tower Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form EU5 – Boiler Information Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form HMAP – Hot Mix Asphalt Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Form CBP - Concrete Batch Plant Please Specify number of forms attached: _____	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form BCE - Baghouses Control Equipment	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form SCE - Scrubbers Control Equipment	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Forms EI-CP1 - EI-CP4 - Emissions Inventory- criteria pollutants (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	PP – Plot Plan	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Forms MI1 – MI4 – Modeling (Excel workbook, all 4 worksheets)	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Form FRA – Federal Regulation Applicability	<input type="checkbox"/>

DEQ USE ONLY	
Date Received	
Project Number	
Payment / Fees Included? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Check Number	



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Revision 3
03/26/07

Please see instructions on page 2 before filling out the form.

All information is required. If information is missing, the application will not be processed.

IDENTIFICATION	
1. Company Name	Idaho Milk Products, Inc.
2. Facility Name (if different than #1)	
3. Facility I.D. No.	
4. Brief Project Description:	Milk Processing Plant
FACILITY INFORMATION	
5. Owned/operated by: (✓ if applicable)	<input type="checkbox"/> Federal government <input type="checkbox"/> County government <input type="checkbox"/> State government <input type="checkbox"/> City government
6. Primary Facility Permit Contact Person/Title	Tom Myers, President
7. Telephone Number and Email Address	(805) 341-1214 tysenter@aol.com
8. Alternate Facility Contact Person/Title	Aaron Baker, Project Manager
9. Telephone Number and Email Address	(801) 381-5850 abaker@big-d.com
10. Address to which permit should be sent	165 South 100 East
11. City/State/Zip	Jerome, Idaho 83338
12. Equipment Location Address (if different than #10)	
13. City/State/Zip	Jerome, Idaho 83338
14. Is the Equipment Portable?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. SIC Code(s) and NAISC Code	Primary SIC: 2023 Secondary SIC (if any): NAICS: 311514
16. Brief Business Description and Principal Product	The facility will process protein powders, lactose powders and cream.
17. Identify any adjacent or contiguous facility that this company owns and/or operates	None
PERMIT APPLICATION TYPE	
18. Specify Reason for Application	<input checked="" type="checkbox"/> New Facility <input type="checkbox"/> New Source at Existing Facility <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modify Existing Source: Permit No.: Date Issued: <input type="checkbox"/> Permit Revision <input type="checkbox"/> Required by Enforcement Action: Case No.:
CERTIFICATION	
IN ACCORDANCE WITH IDAPA 58.01.01.123 (RULES FOR THE CONTROL OF AIR POLLUTION IN IDAHO), I CERTIFY BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION IN THE DOCUMENT ARE TRUE, ACCURATE, AND COMPLETE.	
19. Responsible Official's Name/Title	Tom Myers, President
20. RESPONSIBLE OFFICIAL SIGNATURE	<i>TR Myers</i> Date: Nov 5 07
21. <input checked="" type="checkbox"/> Check here to indicate you would like to review a draft permit prior to final issuance.	



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Emissions Unit - General Form EU0

PERMIT TO CONSTRUCT APPLICATION

Revision 2
02/14/07

Please see instructions on page 2 before filling out the form.

IDENTIFICATION							
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant		Facility ID No:			
Brief Project Description:		Construction of a new milk processing plant					
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION							
1. Emissions Unit (EU) Name:		MPC/SKIM MILK DRYER					
2. EU ID Number:		P101					
3. EU Type:		<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:			Date Issued:		
4. Manufacturer:		MAXON					
5. Model:		CROSSFIRE LOW NOX LINE BURNER					
6. Maximum Capacity:		3609 LB/HR MPC / 8142 LB/HR SKIM / 40MMBTU/HR					
7. Date of Construction:		2007-2008					
8. Date of Modification (if any)							
9. Is this a Controlled Emission Unit?		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT							
10. Control Equipment Name and ID:		BAGHOUSES / P101A & P101B					
11. Date of Installation:		2007-2008		12. Date of Modification (if any):			
13. Manufacturer and Model Number:		CER CER-400					
14. ID(s) of Emission Unit Controlled:		P101					
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
Control Efficiency		Pollutant Controlled					
		PM	PM10	SO ₂	NOx	VOC	CO
		97.57 skim/ 94.49 MPC	97.57 skim/ 94.49 MPC				
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Performance guarantee from C/E/Rogers							
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)							
18. Actual Operation		20 HR/DAY 7,300 HOURS/YEAR					
19. Maximum Operation		8,760 HOURS/YEAR					
REQUESTED LIMITS							
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):							
<input checked="" type="checkbox"/> Production Limit(s):		3609 LB/HR MPC / 8142 LB/HR SKIM					
<input type="checkbox"/> Material Usage Limit(s):							
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports					
<input type="checkbox"/> Other:							
21. Rationale for Requesting the Limit(s):		THESE ARE DESIGN BASIS MAXIMUM PRODUCTION RATES					



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Emissions Unit - General **Form EU0**

PERMIT TO CONSTRUCT APPLICATION

Revision 2
02/14/07

Please see instructions on page 2 before filling out the form.

IDENTIFICATION

Company Name: Idaho Milk Products	Facility Name: Milk Processing Plant	Facility ID No:
Brief Project Description:	Construction of new milk processing plant.	

EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION

1. Emissions Unit (EU) Name:	MPC/SKIM MILK FLUID-BED		
2. EU ID Number:	P102		
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:		Date Issued:
4. Manufacturer:	C/E/ROGERS		
5. Model:	MPC/SKIM MILK FLUID-BED		
6. Maximum Capacity:	5,976 LB/HR MPC / 13,491 LB/HR SKIM		
7. Date of Construction:	2007-2008		
8. Date of Modification (if any)			
9. Is this a Controlled Emission Unit?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.		

EMISSIONS CONTROL EQUIPMENT

10. Control Equipment Name and ID:	FLUID-BED BAGHOUSE / P102					
11. Date of Installation:	2007-2008	12. Date of Modification (if any):				
13. Manufacturer and Model Number:	C/E/ROGERS, CER-78					
14. ID(s) of Emission Unit Controlled:	P102					
15. Is operating schedule different than emission units(s) involved?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
	Pollutant Controlled					
	PM	PM10	SO ₂	NO _x	VOC	CO
Control Efficiency	99.84 MPC/ 99.94skim	99.84 MPC/ 99.94skim				

17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Performance guarantee from C/E/Rogers

EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)

18. Actual Operation	20 HR/DAY / 7,300 HOURS/YEAR
19. Maximum Operation	8,760 HOURS/YEAR

REQUESTED LIMITS

20. Are you requesting any permit limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)	
<input type="checkbox"/> Operation Hour Limit(s):		
<input checked="" type="checkbox"/> Production Limit(s):	5,976 LB/HR MPC / 13,491 LB/HR SKIM	
<input type="checkbox"/> Material Usage Limit(s):		
<input type="checkbox"/> Limits Based on Stack Testing	Please attach all relevant stack testing summary reports	
<input type="checkbox"/> Other:		
21. Rationale for Requesting the Limit(s):	MAXIMUM DESIGN PRODUCTION RATES	



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IDENTIFICATION

Company Name: Idaho Milk Products	Facility Name: Milk Processing Plant	Facility ID No:
Brief Project Description:	Construction of a new milk processing plant	

EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION

1. Emissions Unit (EU) Name:	PERMEATE DRYER		
2. EU ID Number:	P103		
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:		Date Issued:
4. Manufacturer:	MAXON		
5. Model:	CROSSFIRE LOW NOX LINE BURNER		
6. Maximum Capacity:	7,867 LB/HR PERMEATE / 12,000,000 BTU/HR		
7. Date of Construction:	2007-2008		
8. Date of Modification (if any)			
9. Is this a Controlled Emission Unit?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.		

EMISSIONS CONTROL EQUIPMENT

10. Control Equipment Name and ID:	SCRUBBER / P103					
11. Date of Installation:	2007-2008	12. Date of Modification (if any):				
13. Manufacturer and Model Number:	CER / CER-WSS					
14. ID(s) of Emission Unit Controlled:	P103					
15. Is operating schedule different than emission units(s) involved?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
	Pollutant Controlled					
	PM	PM10	SO ₂	NO _x	VOC	CO
Control Efficiency	87	87				

17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Performance guarantee from C/E/Rogers

EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)

18. Actual Operation	20 HR/DAY / 7300 HOURS/YEAR
19. Maximum Operation	8,760 HOURS/YEAR

REQUESTED LIMITS

20. Are you requesting any permit limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)
<input type="checkbox"/> Operation Hour Limit(s):	
<input checked="" type="checkbox"/> Production Limit(s):	7867 LB/HR PERMEATE POWDER
<input type="checkbox"/> Material Usage Limit(s):	
<input type="checkbox"/> Limits Based on Stack Testing	Please attach all relevant stack testing summary reports
<input type="checkbox"/> Other:	
21. Rationale for Requesting the Limit(s):	MAXIMUM DESIGN PRODUCTION RATE



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IDENTIFICATION						
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant		Facility ID No:		
Brief Project Description:		Construction of new milk processing plant.				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:	PERMEATE FLUID-BED					
2. EU ID Number:	P104					
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:					Date Issued:
4. Manufacturer:	C/E/ROGERS					
5. Model:	PERMEATE FLUID-BED					
6. Maximum Capacity:	9,096 lb/hr Permeate powder					
7. Date of Construction:	2007-2008					
8. Date of Modification (if any)						
9. Is this a Controlled Emission Unit?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:	FLUID-BED BAGHOUSE / P104					
11. Date of Installation:	2007-2008	12. Date of Modification (if any):				
13. Manufacturer and Model Number:	C/E/ROGERS, CER-216					
14. ID(s) of Emission Unit Controlled:	P104					
15. Is operating schedule different than emission units(s) involved?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
Control Efficiency	Pollutant Controlled					
	PM	PM10	SO ₂	NO _x	VOC	CO
	99.90%	99.9				
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Performance guarantee from C/E/Rogers						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation	20 HR/DAY / 7300 HOURS/YEAR					
19. Maximum Operation	8,760 HOURS/YEAR					
REQUESTED LIMITS						
20. Are you requesting any permit limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):						
<input checked="" type="checkbox"/> Production Limit(s):	9096 LB/HR PERMEATE POWDER					
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing	Please attach all relevant stack testing summary reports					
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):	MAXIMUM DESIGN PRODUCTION RATE					



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IDENTIFICATION						
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant			Facility ID No:	
Brief Project Description:		Construction of new milk processing plant.				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:	PERMEATE POWDER RECEIVING					
2. EU ID Number:	P105					
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:					Date Issued:
4. Manufacturer:	C/E/ROGERS					
5. Model:	PERMEATE POWDER RECEIVING					
6. Maximum Capacity:	9096 LB/HR PERMEATE POWDER					
7. Date of Construction:	2007-2008					
8. Date of Modification (if any)						
9. Is this a Controlled Emission Unit?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:	BAGHOUSES / P105					
11. Date of Installation:	2007-2008	12. Date of Modification (if any):				
13. Manufacturer and Model Number:	NU-Cor / NCRD 84-21-3T					
14. ID(s) of Emission Unit Controlled:	P105					
15. Is operating schedule different than emission units(s) involved?:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
16. Does the manufacturer guarantee the control efficiency of the control equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)					
	Pollutant Controlled					
	PM	PM10	SO ₂	NOx	VOC	CO
Control Efficiency	99.9995%	99.9995				
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency. Performance guarantee from C/E/Rogers						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation	20 HR/DAY 7300 HOURS/YEAR					
19. Maximum Operation	8,760 HOURS/YEAR					
REQUESTED LIMITS						
20. Are you requesting any permit limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):						
<input checked="" type="checkbox"/> Production Limit(s):	9096 LB/HR PERMEATE POWDER					
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing	Please attach all relevant stack testing summary reports					
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):	MAXIMUM DESIGN PRODUCTION RATE					



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IDENTIFICATION						
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant			Facility ID No:	
Brief Project Description:		Construction of new milk processing plant.				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:		BOILER #1				
2. EU ID Number:		P106				
3. EU Type:		<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:			Date Issued:	
4. Manufacturer:		SUPERIOR BOILER WORKS, INC. OR EQUIVALENT				
5. Model:		SUPER SEMIINOLE 4000 (OR EQUIVALENT)				
6. Maximum Capacity:		33,475,000 BTU/HR				
7. Date of Construction:		2007-2008				
8. Date of Modification (if any)						
9. Is this a Controlled Emission Unit?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.				
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?:		<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)				
Control Efficiency		Pollutant Controlled				
		PM	PM10	SO ₂	NO _x	VOC
						CO
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation		8,760 HOURS/YEAR				
19. Maximum Operation		8,760 HOURS/YEAR				
REQUESTED LIMITS						
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)				
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input checked="" type="checkbox"/> Material Usage Limit(s):		287.5 MM SCF NG/YR BOTH BOILERS COMBINED				
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):		FULLY REDUNDANT BOILERS				



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IDENTIFICATION						
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant			Facility ID No:	
Brief Project Description:		Construction of new milk processing plant.				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:	BOILER #2					
2. EU ID Number:	P107					
3. EU Type:	<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:					Date Issued:
4. Manufacturer:	SUPERIOR BOILER WORKS, INC. or equivalent					
5. Model:	SUPER SEMIINOLE 4000 (OR EQUIVALENT)					
6. Maximum Capacity:	33,475,000 BTU/HR					
7. Date of Construction:	2007-2008					
8. Date of Modification (if any)						
9. Is this a Controlled Emission Unit?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, Complete the following section. If No, go to line 18.					
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?:		<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach and label manufacturer guarantee)				
Control Efficiency	Pollutant Controlled					
	PM	PM10	SO ₂	NO _x	VOC	CO
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation	8,760 HOURS/YEAR					
19. Maximum Operation	8,760 HOURS/YEAR					
REQUESTED LIMITS						
20. Are you requesting any permit limits?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)					
<input type="checkbox"/> Operation Hour Limit(s):						
<input type="checkbox"/> Production Limit(s):						
<input checked="" type="checkbox"/> Material Usage Limit(s):		287.5 MM SCF NG/DAY BOTH BOILERS				
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):	Fully redundant boilers					



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IDENTIFICATION						
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant			Facility ID No:	
Brief Project Description:		Construction of new milk processing plant				
EMISSIONS UNIT (PROCESS) IDENTIFICATION & DESCRIPTION						
1. Emissions Unit (EU) Name:		EMERGENCY GENERATOR				
2. EU ID Number:		P108				
3. EU Type:		<input checked="" type="checkbox"/> New Source <input type="checkbox"/> Unpermitted Existing Source <input type="checkbox"/> Modification to a Permitted Source -- Previous Permit #:			Date Issued:	
4. Manufacturer:		CUMMINS				
5. Model:		QST30-G5 NONROAD 2 (OR EQUIVALENT)				
6. Maximum Capacity:		1490 HP				
7. Date of Construction:		2007-2008				
8. Date of Modification (if any)						
9. Is this a Controlled Emission Unit?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If Yes, complete the following section. If No, go to line 18.				
EMISSIONS CONTROL EQUIPMENT						
10. Control Equipment Name and ID:						
11. Date of Installation:		12. Date of Modification (if any):				
13. Manufacturer and Model Number:						
14. ID(s) of Emission Unit Controlled:						
15. Is operating schedule different than emission units(s) involved?		<input type="checkbox"/> Yes <input type="checkbox"/> No				
16. Does the manufacturer guarantee the control efficiency of the control equipment?		<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, attach and label manufacturer guarantee)				
Control Efficiency	Pollutant Controlled					
	PM	PM10	SO ₂	NO _x	VOC	CO
17. If manufacturer's data is not available, attach a separate sheet of paper to provide the control equipment design specifications and performance data to support the above mentioned control efficiency.						
EMISSION UNIT OPERATING SCHEDULE (hours/day, hours/year, or other)						
18. Actual Operation		1 hour/week				
19. Maximum Operation		500 HOURS/YEAR				
REQUESTED LIMITS						
20. Are you requesting any permit limits?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check all that apply below)				
<input checked="" type="checkbox"/> Operation Hour Limit(s):		500 HOURS/YEAR				
<input type="checkbox"/> Production Limit(s):						
<input type="checkbox"/> Material Usage Limit(s):						
<input type="checkbox"/> Limits Based on Stack Testing		Please attach all relevant stack testing summary reports				
<input type="checkbox"/> Other:						
21. Rationale for Requesting the Limit(s):		Source is exempt				



DEQ AIR QUALITY PROGRAM
1410 N. Hilton, Boise, ID 83706
For assistance, call the
Air Permit Hotline – 1-877-5PERMIT

PERMIT TO CONSTRUCT APPLICATION

Revision 2
02/13/07

Please see instructions on page 2 before filling out the form.

IDENTIFICATION				
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant		Facility ID No:
Brief Project Description:		Construction of a new milk processing plant		
EXEMPTION				
Please see IDAPA 58.01.01.222 for a list of industrial boilers that are exempt from Permit to Construct requirements.				
Boiler (EMISSION UNIT) DESCRIPTION AND SPECIFICATIONS				
1. Type of Request <input checked="" type="checkbox"/> New Unit <input type="checkbox"/> Unpermitted Existing Unit <input type="checkbox"/> Modification to a unit with Permit #:				
2. Use of Boiler: <input checked="" type="checkbox"/> % Used For Process <input type="checkbox"/> % Used For Space Heat <input type="checkbox"/> % Used For Generating Electricity <input type="checkbox"/> Other:				
3. Boiler ID Number: P106		4. Rated Capacity: <input checked="" type="checkbox"/> 33.48 Million British Thermal Units Per Hour (MMBtu/hr) <input type="checkbox"/> 1,000 Pounds Steam Per Hour (1,000 lb steam/hr)		
5. Construction Date: 2007-2008		6. Manufacturer: Superior		7. Model: Super Seminole 4000
8. Date of Modification (if applicable):		9. Serial Number (if available):		10. Control Device (if any): Note: Attach applicable control equipment form(s)
FUEL DESCRIPTION AND SPECIFICATIONS				
11. Fuel Type	<input type="checkbox"/> Diesel Fuel (#) (gal/hr)	<input checked="" type="checkbox"/> Natural Gas (cf/hr)	<input type="checkbox"/> Coal (unit: /hr)	<input type="checkbox"/> Other Fuels (unit: /hr)
12. Full Load Consumption Rate		32,819 scf/hr		
13. Actual Consumption Rate		32,819 scf/hr		
14. Fuel Heat Content (Btu/unit, LHV)		1,020 Btu/scf		
15. Sulfur Content wt%				
16. Ash Content wt%		N/A		
STEAM DESCRIPTION AND SPECIFICATIONS				
17. Steam Heat Content	NA	NA		
18. Steam Temperature (°F)	N/A	N/A		
19. Steam Pressure (psi)	N/A	N/A		
20. Steam Type	N/A	N/A	<input type="checkbox"/> Saturated <input type="checkbox"/> Superheated	<input type="checkbox"/> Saturated <input type="checkbox"/> Superheated
OPERATING LIMITS & SCHEDULE				
21. Imposed Operating Limits (hours/year, or gallons fuel/year, etc.):				
22. Operating Schedule (hours/day, months/year, etc.): 24 hr/day, 365 days/yr				



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Revision 2
02/13/07

Please see instructions on page 2 before filling out the form.

IDENTIFICATION				
Company Name: Idaho Milk Products		Facility Name: Milk Processing Plant		Facility ID No:
Brief Project Description:		Construction of a new milk processing plant		
EXEMPTION				
Please see IDAPA 58.01.01.222 for a list of industrial boilers that are exempt from Permit to Construct requirements.				
Boiler (EMISSION UNIT) DESCRIPTION AND SPECIFICATIONS				
1. Type of Request <input checked="" type="checkbox"/> New Unit <input type="checkbox"/> Unpermitted Existing Unit <input type="checkbox"/> Modification to a unit with Permit #:				
2. Use of Boiler: <input checked="" type="checkbox"/> % Used For Process <input type="checkbox"/> % Used For Space Heat <input type="checkbox"/> % Used For Generating Electricity <input type="checkbox"/> Other:				
3. Boiler ID Number: P107		4. Rated Capacity: <input checked="" type="checkbox"/> 33.48 Million British Thermal Units Per Hour (MMBtu/hr) <input type="checkbox"/> 1,000 Pounds Steam Per Hour (1,000 lb steam/hr)		
5. Construction Date: 2007-2008		6. Manufacturer: Superior		7. Model: Super Seminole 4000
8. Date of Modification (if applicable):		9. Serial Number (if available):		10. Control Device (if any): Note: Attach applicable control equipment form(s)
FUEL DESCRIPTION AND SPECIFICATIONS				
11. Fuel Type	<input type="checkbox"/> Diesel Fuel (#) (gal/hr)	<input checked="" type="checkbox"/> Natural Gas (cf/hr)	<input type="checkbox"/> Coal (unit: /hr)	<input type="checkbox"/> Other Fuels (unit: /hr)
12. Full Load Consumption Rate		32,819 scf/hr		
13. Actual Consumption Rate		32,819 scf/hr		
14. Fuel Heat Content (Btu/unit, LHV)		1,020 Btu/scf		
15. Sulfur Content wt%				
16. Ash Content wt%		N/A		
STEAM DESCRIPTION AND SPECIFICATIONS				
17. Steam Heat Content	NA	NA		
18. Steam Temperature (°F)	N/A	N/A		
19. Steam Pressure (psi)	N/A	N/A		
20. Steam Type	N/A	N/A	<input type="checkbox"/> Saturated <input type="checkbox"/> Superheated	<input type="checkbox"/> Saturated <input type="checkbox"/> Superheated
OPERATING LIMITS & SCHEDULE				
21. Imposed Operating Limits (hours/year, or gallons fuel/year, etc.):				
22. Operating Schedule (hours/day, months/year, etc.): 24 hr/day, 365 days/yr				



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PERMIT TO CONSTRUCT APPLICATION

Revision 0
04/02/07

Please see instructions on page 3 before filling out the form.

IDENTIFICATION				
Company Name: Idaho Milk Products, Inc.		Facility Name: Idaho Milk Products		
		Facility ID No.:		
Brief Project Description: Construction of a milk processing plant.				
CYCLONE SEPARATOR INFORMATION				
Equipment Description				
Manufacturer:	C.E. Rogers			
Model Number:	CER-94-Cyclone			
Dimensions	<p>Give dimensions of cyclone. (See sample diagram above.)</p> <p>1. B: 25.5 in. 5. Z: 212 in. 2. H: 51.0 in. 6. D: 94 in. 3. S: 39.0 in. 7. A: 46 in. 4. L: 138 in. 8. J: 42 in.</p>	Particulate Size Distribution Data		
		Micron range	Particle size distribution weight %	Manufacturer's guaranteed removal efficiency for each micron range
		0.5-1.0	TBD	TBD
		1.0-5.0	TBD	TBD
		5-10	TBD	TBD
		10-20	TBD	TBD
		Over 20	TBD	TBD
Type of Cyclone	<input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry			
Type of Cyclone Unit	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Quadruple <input type="checkbox"/> Dual <input type="checkbox"/> Multiclone			
Blower	Blower horsepower: 200 hp Design flow rate: scfm Draft: <input checked="" type="checkbox"/> Forced <input type="checkbox"/> Induced			
Design Criteria	Cyclone configuration: <input type="checkbox"/> Positive pressure <input checked="" type="checkbox"/> Negative pressure			
Pre-Treatment Device	<input type="checkbox"/> Cyclone <input type="checkbox"/> Knock-out chamber <input type="checkbox"/> Precooler <input checked="" type="checkbox"/> None <input type="checkbox"/> Preheater			
Post-Treatment Device	<input checked="" type="checkbox"/> Baghouse/Cartridge <input type="checkbox"/> HEPA <input type="checkbox"/> Other:			

Process Stream Characteristics			
Brief Description of Process	<p>Air laden with milk protein concentrate powder enters the cyclone from a vertical spray dryer.</p> <p>Powder discharges from the cyclone through a rotary air lock.</p> <p>Clean air discharges unit and is further processed in a baghouse collector.</p>		
Flow Data	<p>Gas stream temperature: 190 degrees F</p> <p>Moisture content: 0.054 grams of water/cubic feet (ft³) of dry air</p> <p><u>Pressure drop range</u></p> <p>High: 10.0 in. H₂O Low: 5.0 in. H₂O</p> <p>Dew point temperature of process stream: 117 degrees F</p> <p>Inlet flow rate: 35,000 ACFM</p>		
Dust Collection Device	<p><input type="checkbox"/> Pneumatic conveyor <input checked="" type="checkbox"/> Rotary airlock valves <input type="checkbox"/> Screw conveyors <input type="checkbox"/> Closed container</p> <p><input type="checkbox"/> Double dump <input type="checkbox"/> Drag conveyor</p> <p><input type="checkbox"/> Manual discharge device: <input type="checkbox"/> Slide gate OR <input type="checkbox"/> Hinged doors or drawers</p>		
Operating Schedule	Normal:	20 hours/day	7 days/week 50 weeks/year
	Maximum:	23 hours/day	7 days/week 52 weeks/year



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PERMIT TO CONSTRUCT APPLICATION

Revision 0
04/02/07

Please see instructions on page 3 before filling out the form.

IDENTIFICATION																				
Company Name:	Idaho Milk Products, Inc.	Facility Name: Idaho Milk Products Facility ID No.:																		
Brief Project Description: Construction of a milk processing plant.																				
CYCLONE SEPARATOR INFORMATION																				
Equipment Description																				
Manufacturer:	C.E. Rogers																			
Model Number:	CER-104-Cyclone																			
Dimensions	<p>Give dimensions of cyclone. (See sample diagram above.)</p> <p>1. B: 24 in. 5. Z: 187 in. 2. H: 49 in. 6. D: 104 in. 3. S: 7.35 in. 7. A: 47 in. 4. L: 130 in. 8. J: 32.5 in.</p>																			
	<table border="1"> <thead> <tr> <th>Micron range</th> <th>Particle size distribution weight %</th> <th>Manufacturer's guaranteed removal efficiency for each micron range</th> </tr> </thead> <tbody> <tr> <td>0.5-1.0</td> <td>TBD</td> <td>TBD</td> </tr> <tr> <td>1.0-5.0</td> <td>TBD</td> <td>TBD</td> </tr> <tr> <td>5-10</td> <td>TBD</td> <td>TBD</td> </tr> <tr> <td>10-20</td> <td>TBD</td> <td>TBD</td> </tr> <tr> <td>Over 20</td> <td>TBD</td> <td>TBD</td> </tr> </tbody> </table>		Micron range	Particle size distribution weight %	Manufacturer's guaranteed removal efficiency for each micron range	0.5-1.0	TBD	TBD	1.0-5.0	TBD	TBD	5-10	TBD	TBD	10-20	TBD	TBD	Over 20	TBD	TBD
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Over 20	TBD	TBD																		
Type of Cyclone <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Dry																				
Type of Cyclone Unit <input checked="" type="checkbox"/> Single <input type="checkbox"/> Quadruple <input type="checkbox"/> Dual <input type="checkbox"/> Multiclone																				
Blower Blower horsepower: 125 hp Design flow rate: scfm Draft: <input checked="" type="checkbox"/> Forced <input type="checkbox"/> Induced																				
Design Criteria Cyclone configuration: <input type="checkbox"/> Positive pressure <input checked="" type="checkbox"/> Negative pressure																				
Pre-Treatment Device	<input type="checkbox"/> Cyclone <input type="checkbox"/> Knock-out chamber <input type="checkbox"/> Precooler <input checked="" type="checkbox"/> None <input type="checkbox"/> Preheater	Post-Treatment Device <input type="checkbox"/> Baghouse/Cartridge <input type="checkbox"/> HEPA <input checked="" type="checkbox"/> Other: wet scrubber																		

Process Stream Characteristics									
Brief Description of Process	<p>Air laden with milk permeate powder enters the cyclone from a vertical spray dryer.</p> <p>Powder discharges from the cyclone through a double wafer air lock.</p> <p>Clean air discharges unit and is further processed in a wet scrubber.</p>								
Flow Data	<p>Gas stream temperature: 112 degrees F</p> <p>Moisture content: 0.0422 grams of water/cubic feet (ft³) of dry air</p> <p><u>Pressure drop range</u></p> <p>High: 8.0 in. H₂O Low: 4.0 in. H₂O</p> <p>Dew point temperature of process stream: 99 degrees F</p> <p>Inlet flow rate: 26,600 ACFM</p>								
Dust Collection Device	<p><input type="checkbox"/> Pneumatic conveyor <input type="checkbox"/> Rotary airlock valves <input type="checkbox"/> Screw conveyors <input type="checkbox"/> Closed container</p> <p><input checked="" type="checkbox"/> Double dump <input type="checkbox"/> Drag conveyor</p> <p><input type="checkbox"/> Manual discharge device: <input type="checkbox"/> Slide gate OR <input type="checkbox"/> Hinged doors or drawers</p>								
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Normal:	20 hours/day	7 days/week	50 weeks/year						
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